

REASON		GRADE  O	Inspection Date:	ESTABLISHMENT NAME:	
Regular	✓		05/15/2018	NENE CHILD CARE CENTER	
Follow-Up			Time In/Out:	OWNER/OPERATOR:	
Complaint			09:30 AM   10:30 AM	SORIANO, DORIS T.	
Investigation			RATING  A	LOCATION:	Establishment Type:
Other:		Sanitary Permit No.:		MANJILAO	CCC/N
			20000-17000240	PERMIT STATUS: <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Temporary <input type="checkbox"/> Expired	
No. of Children: 12 Male 19 Female 31 Total			Child Care License: No. 180183 <input checked="" type="checkbox"/> Valid <input type="checkbox"/> Provisional <input type="checkbox"/> Expired		

The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal a written request for hearing must be submitted before the indicated correction date.

I have read and understand the above violation(s) and I am aware of the corrective measures to be taken.

Received By (Name & Title):  
 Ariana Soriano Director  
 DEH Inspector (Name & Title):  
 V. RAYMUNDO, EPHO I